



Yukon Liquor Corporation

9031 Quartz Road
Whitehorse, Yukon Y1A 4P9
Fax: 867-393-6306
www.ylc.yk.ca

**AFFIDAVIT FOR
APPLICATION FOR LIQUOR LICENCE**

**AFFIDAVIT
OATH OF APPLICANT**

I/We, _____ and _____
(name) (name)

of the _____
(name of sole proprietorship, partnership, corporation, organization)

of _____ in Yukon
(community/location)

MAKE OATH AND SAY THAT:

1. I/we have read the Application;
2. I/we have knowledge of the matters therein;
3. All the facts stated and information furnished therein and pursuant thereto are true and correct;
4. I/we am/are the full age of nineteen years; and
5. I/we am/are the authorized representative of the applicant.

Signature

Signature

SWORN BEFORE ME AT THE)
_____ of _____)
in Yukon, this _____ day of _____)
20 ____.)

_____)
A Notary Public in and for
Yukon